{stdlongdate} Organization ID: {stdOrgCodeId}

{stdOCName}

{stdOrgName}

{stdOCAdrCorStreet1}

{x stdOCAdrCorStreet2}

{stdOCAdrCorCity} {stdOCAdrCorState} {stdOCAdrCorZip}

**RE:** **{PLANNAME} PLAN PREMIUM CHANGE NOTIFICATION**

Dear {stdOCSalutation}:

This is notification to you that the NDPERS {PlanName} premiums through {ProviderName} will be changing effective {EffectiveDate}.

{x if LetterTypeHealth is true}

This biennium employers who participate in the Employer Based Wellness Program will be assessed the “With Wellness” rate and those who do not participate in the Employer Based Wellness Program will be assessed the “Without Wellness” rate. Notice has previously been sent to your employer indicating if you are approved to participate in the Employer Based Wellness Program. Pursuant to that renewal, the new rates for your group will change as follows:

{x endblock}

{x if LetterTypeHealth is true}

|  |  |  |
| --- | --- | --- |
| **ACTIVE RATES** | **“With Wellness” Rate** | **“Without Wellness” Rate** |
| {tb tblHealthDtl} |  |  |

{x if HealthCOBRAAvailable is true}

|  |  |  |
| --- | --- | --- |
| **COBRA RATES** | **“With Wellness” Rate** | **“Without Wellness” Rate** |
| {tb tblHealthCOBRADtl} |  |  |

{x endblock}

{x endblock}

{x if LetterTypeEAP is true}

|  |  |
| --- | --- |
| **ACTIVE RATES** | **Active Premium** |
| {tb tblEAPDtl} |  |

{x endblock}

{x if LetterTypeDental is true}

|  |  |  |
| --- | --- | --- |
| **Code Description** | **Current Monthly Premium** | **New Monthly Premium** |
| {tb tblDentalDtl} |  |  |

{x endblock}

{x if LetterTypeVision is true}

|  |  |  |
| --- | --- | --- |
| **Code Description** | **Current Monthly Premium** | **New Monthly Premium** |
| {tb tblVisionDtl} |  |  |

{x endblock}

{x if LetterTypeLife is true}

The new Life Insurance Rates can be found on the NDPERS website at www.nd.gov/ndpers.

{x endblock}

{x if LetterTypeLTC is true}

Attached for your reference is the new Long Term Care Rate Table.

{x endblock}

{x if OrgToBillExists is true}

The following are those retirees that the employer is currently paying premium for. The rates for these individuals will be adjusted as follows:

|  |  |  |
| --- | --- | --- |
| **Name** | **Current Premium** | **New Premium** |
| {tb tblOrgToBillDtl} |  |  |

{x endblock}

{x if TFFRPensionMembersExists is true}

The premium for those TFFR retirees having their premium deducted from their TFFR pension check will be changing as follows:

{x if LetterTypeHealth is true}

|  |  |  |  |
| --- | --- | --- | --- |
| **Rate Structure** | **Coverage Code** | **Current Premium** | **New Premium** |
| {tb tblHealthTFFRDtl} |  |  |  |

{else}

|  |  |  |
| --- | --- | --- |
| **Name** | **Current Premium** | **New Premium** |
| {tb tblTFFRtDtl} |  |  |

{x endif}

{x endblock}

If you are an employer on the State or Higher Education PeopleSoft payroll system, the insurance rates will be updated in PeopleSoft by NDPERS.

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Benefits Division